Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Numerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office DISTRICT I J.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION WELL API NO. P.O.Box 2088 30-025-07658 P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease FEE X STATE __ DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) South Hobbs (GSA) Unit 1. Type of Well WELL X 2. Name of Operator 8. Well No. **Amoco Production Company** (Room 18.108) 3. Address of operator 9. Pool name or Wildcat P.O. Box 3092, Houston, Texas 77253-3902 Hobbs Grayburg San Andres 4. Well Location 660 North Unit Letter Feet From The Line and Feet From The Line Section Township 19-S **NMPM** Range 38-E Lea, NM County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3604' DF Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data **NOTICE OF INTENTION TO:** SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON **REMEDIAL WORK** ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB Temporary Abandonment OTHER: OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work.) SEE RULE 1103. MIRUSU (6/27/93) X RTXIB X PTG X RIH X BIT X SCRAPER X TBG TO 3900' X POH X RIH X CIBP X SA 3860' X TST X 540 PSI X 30 MIN X OK X DUMP 2 SX SN ON TOP CIBP X PULL UP HOLE. TAG SN 3850' X DISPLACE HOLE X PKR FLUID X POH X LD 106 JTS TBG X LEFT 16 JTS IN WELL FOR KILL STRING X RBXIT X RDMOSU (6/28/93). This Approval of Temperary Abandonment Expires I hereby certify that the information above is true and complete to the best of my knowledge and belief. Staff Assistant 07-19-94 SIGNATURE _ TITLE _ TYPE OR PRINT NAME Devina M. Prince TELEPHONE NO. (713) 366-7686 ORIGINAL SIGNED BY JERRY SEXTON (This space for State Use) JUL 25 1994 DISTRICT I SUPERVISOR APPROVED BY _